



Community Health Center, Inc.

675 Main Street, Middletown, CT 06457 | 860.347.6971 | www.chc1.com | [Facebook/CHCInc](https://www.facebook.com/CHCInc) | [Twitter/@CHCConnecticut](https://twitter.com/CHCConnecticut)

Testimony Submitted in Support of Raised Bill SB 213, An Act Allowing Medical Assistants to Administer Vaccines

Submitted by Mary Blankson, DNP, APRN, FNP-C, FAAN
Chief Nursing Officer
Community Health Center, Inc.
635 Main Street
Middletown, CT 06457

Members of the Public Health Committee:

Thank you for this opportunity to testify in support of SB 213, An Act Allowing Medical Assistants to Administer Vaccines.

My name is Mary Blankson, and I am the Chief Nursing Officer for the Community Health Center, Inc. I have supported CHCI's roughly 100 Medical Assistants (MAs), 50 Registered Nurses (RNs) and 12 Licensed Practical Nurses (LPNs) for almost eight years and have testified for various bills to support advancing Medical Assistant scope of practice to include any amount of medication administration.

The Community Health Center, Inc. (CHCI) is Connecticut's largest FQHC, with almost 140,000 active patients cared for in our primary care sites across the state. CHCI, an NCQA (National Committee for Quality Assurance) and Joint Commission-recognized patient centered and primary care medical home, is organized on a team-based model of care in which all members of the team practice to the fullest extent of their education and training, within the guidelines of scope of practice and regulation.

As you all are well aware, we have experienced unprecedented challenges over the course of the past few years supporting both state and national efforts to combat the COVID-19 pandemic. This has involved implementing mass testing, followed by the nation's second mass vaccination effort at CT's Pratt & Whitney airstrip, with four fully functioning mass vaccination sites, mobile and homebound vaccination, and clinic administrations, totaling over 600,000 doses given to date in our organization. In order to accomplish this endeavor, CHC took full advantage



Community Health Center, Inc.

675 Main Street, Middletown, CT 06457 | 860.347.6971 | www.chc1.com | [Facebook/CHCInc](https://www.facebook.com/CHCInc) | [Twitter/@CHCConnecticut](https://twitter.com/CHCConnecticut)

of the Governor's various emergency orders, including those that advanced the scope and coverage for certain clinical staff members, including dentists, dental hygienists trained in anesthesia, all the way to EMTs, and even veterinarians to staff these clinics when we were unable to identify nurses to provide adequate staffing. However, medical assistants who are graduates of accredited, postsecondary medical assistant programs accredited by either the CAAHEP or the ABHES were excluded even though they are trained specifically in medication administration, including immunizations as a part of the routine accredited curricular requirements prior to graduation.

This year, I think the focus on ensuring workforce equity calls for the public health committee to highlight the cultural and racial diversity within the medical assistant workforce, and ask the critical question, why would we continue to limit their practice, while supporting the advancement of scope and practice of other less diverse workforces? There is ample evidence that supports social concordance between patient and clinician to improve the adherence to clinical recommendations. Medical assistants are in fact more socially concordant as a workforce with the patients served in our organization based on race and ethnicity, than other staff types, and therefore could assist in improving vaccine acceptance rates and adherence if allowed to participate in this service in the same way as other clinical care team members.

I want to thank the Public Health Committee for considering this issue and working to elevate this role, particularly as the state of Connecticut has embraced other clinical team members advancing in scope to practice to the top of their training even prior to the COVID-19 pandemic.

In order to successfully deliver on improving patient outcomes, while also reducing overall health care expenditure, it will be important for this committee to support the advancement of ALL team members, including MAs, as they have been supported in 48 other states. They should be empowered to take on more responsibility so that licensed staff (Medical Providers—MDs/DOs, APRNs and PAs; and RNs and LPNs) can take on the challenging work that includes complex care management and chronic illness management, that are even more critical now as we catch-up from what was lost during the COVID-19 pandemic. Today,



Community Health Center, Inc.

675 Main Street, Middletown, CT 06457 | 860.347.6971 | www.chc1.com | [Facebook/CHCInc](https://www.facebook.com/CHCInc) | [Twitter/@CHCConnecticut](https://twitter.com/CHCConnecticut)

our registered nurses are asked to manage care coordination, transition management, complex care management, disease management education and training, triage, and the like. They are significantly restricted in their ability to carry out all these responsibilities because of the time that is devoted to giving immunizations, in particular. Far from replacing nurses in primary care, we believe that allowing medical assistants to administer vaccines as called for in SB 213 will allow nursing to manage the complexity that we face with patients with uncontrolled chronic illness, including those with behavioral health conditions and substance use issues that require a significant amount of time and effort to manage.

Many practices around the country, both FQHCs and non-FQHCs are able to leverage MAs to support vaccination efforts, therefore increasing access for their patients. In fact, this is by far the norm, and not the exception because in forty eight (48) states, medical assistants are either explicitly allowed in statute to administer medications including immunizations, or there is no prohibiting statutory language that prevents them from doing so. Patient safety is best protected by rigorous training, supervision, and appropriate policies, procedures, and documented yearly competency in place at each center that supports their practice as is already the case for all other skills.

As an advanced practice registered nurse who has dedicated her life and practice to advancing primary care, I am in full support of medical assistants achieving here in Connecticut, what they are able to do in forty-eight other states.

We applaud the approach of ensuring that this bill requires immunizations to be administered under the supervision, control and responsibility of a supervising health care provider. This guarantees oversight and supervision as well as provides an opportunity to evaluate the impact of allowing medical assistants to administer immunizations in the primary care setting.

Thank you to the Committee for your consideration.